			
DATENT	ADDI ICATION	FEE DETERMIN	ATION RECORD
PAILI	AFF LIVATION		ALICH HECCHE

Application or Docket Number

Effective October 1, 2000 09822966										6		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN	
TOTAL CLAIMS			17				RAT	E.	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ 7 minus 20=		· A		X\$ 9	=		OR	X\$18=	-
INDEPENDENT CLAIMS			/ minus 3 =		· A		X40:			OR	Váo	
MULTIPLE DEPENDENT CLAIM PRESENT				<u> </u>						<u>. </u>		
* If the difference in column 1 is less than zero, enter "0" in column 2						+135 TOTA			OR		110.	
. *	• •							\L .	eta y e	OR	TOTAL OTHER	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMAI	LL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	** .		=	X\$ 9	=	7	OR	X\$18=	
	Independent	*	Minus	***		=	X40=	= ·		OR	X80=	
	-FIRST-PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM		+135	=		OR	+270=	
							TO	AL			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. F	tt I			AUDII. FEE	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X40=			OR	X80=	
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135:	_		OR	+270=		
							TOT ADDIT. F				TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	AUDII. F	EE 1		•	ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X40=	_		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
	If the entry in colu	ımn 1 is less than t	he entry in colu	ımn 2, writ	e "0" in co	olumn 3.	+135			OR	+270= TOTAL	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											